



MS AF  
REPLY UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP

AMENDMENT TRANSMITTAL LETTER				Docket No. 1110-0279P
Application No. 09/700,338-Conf. #3959	Filing Date November 14, 2000	Examiner U. Winkler	Art Unit 1648	
Applicant(s): Yoshiyuki UENO				
Invention: PREVENTIVES/REMEDIES FOR HEPATIC CIRRHOSIS				
<p><b>MS AF</b>  <b>Commissioner for Patents</b>  <b>P.O. Box 1450</b>  <b>Alexandria, VA 22313-1450</b></p> <p>Transmitted herewith is an amendment in the above-identified application.  The fee has been calculated and is transmitted as shown below.</p>				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	2	- 20 =		x
Independent Claims	2	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within second month				450.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				450.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> A check in the amount of \$ 450.00 to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
#28977				
Dated: August 25, 2005				
<p><i>MaryAnne Armstrong, Ph.D.</i>  MaryAnne Armstrong, Ph.D.  Attorney Reg. No.: 40,069</p> <p>BIRCH, STEWART, KOLASCH &amp; BIRCH, LLP  8110 Gatehouse Rd  Suite 100 East  P.O. Box 747  Falls Church, Virginia 22040-0747  (703) 205-8000</p>				